

Riverview Psychiatric Center

Executive Leadership

Date: March 7, 2007

Committee Members Present:

- √ David Proffitt, Superintendent
- √ William Nelson, Medical Director
- √ Lauret Crommett, Nursing Director
- √ Bob Patnaude, Safety Director
- √ Barbara Sylvester-Pellett, CPI Director/Risk Management
- √ Brian Daskivich, Deputy Superintendent/Programs
- √ Teresa Mayo, Psychology Director
- √ Tina Libby, Rehabilitation Services Director
- √ Terry O'Neal, Admission Coordinator
- √ Lucia Nadeau, Personnel Officer
- √ Stephanie George-Roy, Director of Social Work
- Jamie Morrill, Deputy Superintendent/Administrative Ser.
- √ Holly Dixon, Peer Support Coordinator

Guests:

Minute Recorder: Charlotte Lalime

Next Meeting: March 21, 2007

Minutes Approved:

TOPIC	DISCUSSION	ACTION PLAN	PERSON RESPONSIBLE
Review of Minutes		Approved	C. Lalime
Superintendent's Report	<p>D. Proffitt states that we all need to be looking for substandard conditions and confirm we are meeting our expectations. Our priority is to assure adequate and decent living arrangements for our clients.</p> <p>It has been reported that one of our staff told a client to shut their mouth. David states this cannot be ignored. This incident was also reported 24 hours late. D. Proffitt states that his expectation is that all clients will be treated with respect and dignity. The NOD followed up with this as well.</p> <p>D. Proffitt reports that one of our clients had been in the emergency room for respiratory distress. He then saw him later that day walking out for smoke break - he been assessed by nurse as able to go out safely – weather was also very frigid. Dave says he is struggling to</p>	<p>Noted</p> <p>Informational</p> <p>Informational</p>	L. Crommett

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	<p>know how this assessment could have been made. There seems to be a problem with our ability to questions each other and this affects the leadership group at this table. We need to take action within our scope of discipline about how to clients we serve can stay safe.</p> <p>David states that he had emailed some guiding principles out and received no feedback – if you question these contact Dave to discuss. Five principles are... safe, service provided, reasonable dignity and autonomy, transparency.</p> <p>D. Proffitt expects that the facility leadership be able to explain that directives made from the facility are based on the philosophy of the institution.</p> <p>Clients should understand that decisions made here are made because we follow best practice guidelines.</p> <p>R. Moores was asked by D. Proffitt to build an automated treatment plan process and Ron has notified him that little requested information has been received. D. Proffitt requested that this information be sent to Ron ASAP to be incorporated into the automated system. L. Crommett adds that Beth is waiting for the dictionaries to arrive, she will then edit and key them in.</p> <p>The Hospital Wellness position will work with Staff Development in identifying and coordinating specific trainings they may be needed to maintain staff health. Target date is approximately March 19. Lauret asked if one of these positions could be used to help with transportation of our clients.</p> <p>David expresses his support of a 2nd ADON position as Lauret has a</p>	<p>Informational</p> <p>Informational</p> <p>Informational</p> <p>Information to be sent to Ron ASAP. need to resolve this as soon as possible as CMS will be visiting this year.</p> <p>Notify Don Williams and send letters out.</p> <p>Discuss position with Lauret at another time.</p> <p>Informational</p>	

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	<p>full plate. Dr. Daskivich states he concurs with this need. David adds that he will pay for this by using the Director of Psychology position for a DON. Dr. Mayo will be assuming the Deputy Superintendent position with Brian's anticipated move.</p> <p>The smoking recommendation group is doing great job with clients, denial has dropped. There are some concerns, however, with staff. Whatever can be done will be very helpful to our staff.</p> <p>D. Proffitt notes that he noticed that the door into Lower Kennebec had a pile of cigarettes outside on the ground. He adds that the weekend staff needs to monitor and be sure this is not happening. The NODs should also be monitoring this and David says it is a lack of oversight if they are not doing this.</p>	<p>More initiatives will be planned for the hospital.</p> <p>NODs will monitor smoking areas</p>	<p>T. Libby</p> <p>L. Crommett</p>
Medical Executive Committee	No new issues to present.		
Human Rights	No meeting.		
Safety Committee	No issues to bring forward		
Clinical Leadership	Met regarding fresh air breaks. David asks if all open areas are being observed. The treatment mall and gym are monitored by rehab staff. The units will be responsible for clients in the building. It has been recommended that we offer dinner later than 4:00. Clients are often hungry later in the evening. .	<p>Bob P. is designating locations for surveillance.</p> <p>Lucia will look into</p>	

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		this as far as rules for changing dietary staff's schedule.	
Performance Review Teams	Efficiency committee to look at the admission paperwork process. D. Proffitt was told by a staff member that since we moved in the packet has increased to 27 more pages. T. O'Neal says this is untrue.	Terry will talk with this staff member to discuss this issue.	T. O'Neal
PITs	No new PITs developed.	Noted	
Labor Management	Ms. Nadeau states that we continue to meet bi-weekly with AFSCME, main focus is the Homestead staff moves and Forensic stipends.	Ongoing	
Behavior Response Committee	Meeting was held last week with no issues to bring forward to this group. Angie completed an excellent cost analysis of NAPPI and NAP.	Look at ways to provide good service and weigh against the cost benefits.	D. Proffitt
	D. Proffitt states that he did the Forensic training last Thursday and thanked Angie for keeping him on this schedule. Dave was informed by a staff member that in the past training included much role play, giving them a higher level of confidence. Staff is not feeling the same level of confidence.	Need to follow-up and assure this training provides the level of confidence needed.	A. Newhouse
Nursing Leadership	Lauret explains that the Acudose training is complete. The units have gone to daily MARS and are working through any problems that arise. David says that staff has complained to him regarding time it takes to complete the MARS. Dave has talked with Ron about having an automated system with data entered in this one system. David has put in a request for wireless connections and this will be reviewed. Meditech has system for this, but we do not know if this cost would be approved.	Ron will be included in this project.	Ron Moores

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	Nurses have been submitting applications. We also have a new contract nurses who states that this hospital is state of the art, she was quite impressed with her tour.	Informational	
Clinical Risk Management Committee	B. Sylvester-Pellett reports that she continues to work towards combining the Clinical Risk Committee and the Safety Committee.	Ongoing	B. Sylvester-Pellett
Quality Council	Meeting early next week.		
Policy and Procedure Committee	Work continues on reviewing and updating our Policies. One small change has been made to the contraband policy, to exempt shoes and belts.	Updated policy will be placed on common drive and in policy manuals.	B. Daskivich
Staff Development	Management in State Government training scheduled for next week.	Angie will send copy of those not registered for this training to David.	A. Newhouse
Staff Injuries	J.H. – was thrown against wall by out of control patient and hurt his side. Prior to the incident, he had been out of work for a few days and feels he didn't get a clear report of the dangerousness of this client when he returned. David asks if how we position ourselves in the room could have avoided this. Brian stated that he would hope that this staff had looked at the chart to see if anything new had happened to this client.	Bob will do select tutoring on NAPPI techniques. Lauret will take comments from this committee and review further, offering educational opportunities as appropriate.	B. Patnaude L. Crommett
New Business			
Policy Review	➤ Informed Consent – approved	Approved	

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	<ul style="list-style-type: none"> ➤ Banking in the Riverview Complex ➤ Utilization Management Plan <p>Committee members approved elimination of the following policies:</p> <ul style="list-style-type: none"> ➤ Client involved in External Committees ➤ Treatment Resistive Patients ➤ Refusal of Treatment ➤ Entitlements and rights to Activities ➤ Restrict to Unit Orders 	<p>Tabled until Jamie Morrill can be present.</p> <p>Approved. Will be placed on the Advisory Board agenda for approval.</p>	
JCAHO	Charlotte will follow-up with Ron Moores regarding Access to the JCAHO site for the Leadership Committee.	Noted	C. Lalime
Adjournment at 12:00			